

OFFICE USE ONLY				
Date:				
Application #:				

LOGGING PERMIT APPLICATION

1)	Property owner:				
	Phone #: Email Address:				
2)	Site Location:				
	*SUBMIT MAP OF PARCEL TO BE LOGGED				
	Tax Map Section:	Block:	Lot:		
	PLEASE ATTACH A LETTER, AFFIDAVIT OR CONTRACT FROM THE RECORD OWNER OF THE PROPERTY TO BE LOGGED GRANTING PERMISSION TO THE LOGGER/APPLICANT BY NAME TO CUT TREES AND DESIGNATING THE AREA IN WHICH THEY MAY BE CUT.				
3)	Names of town roads being utilized:				
4)	Anticipated duration of operation:				
5)	Builder/Contractor name:				
	Mailing Address:				
	Phone #:				
Date		Si	gnature of Applicant/Builder/Contractor		
Date		Si	gnature of Owner		
 Date		 C(ode Enforcement Officer		